

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <u>10632438</u>	FILING DATE				
							APPLICANT(S)					
CLAIMS												
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			IND		DEF		
	IND	DEF	IND	DEF	IND	DEF		IND	DEF	IND	DEF	
1	1						51					
2	1	1					52					
3	1	1					53					
4		3					54					
5		3					55					
6		3					56					
7		3					57					
8		3					58					
9		3					59					
10		3					60					
11		1					61					
12		1					62					
13	1	1					63					
14	1	1					64					
15	1	1					65					
16		1					66					
17		1					67					
18							68					
19							69					
20							70					
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40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	1						TOTAL IND.					
TOTAL DEP.	28						TOTAL DEP.					
TOTAL CLAIMS	29						TOTAL CLAIMS					